# Exhibit C

# L16000216043

(Red	questor's Name)	
(Add	dress)	
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ALLAHASSER FLORIGA

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## **COVER LETTER**

TO: Registration Sec Division of Corp			
SUBJECT:	LIBERTY BEE	l MOVING Gro ned Crability Company	up IIC
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspon-	dence concerning this matter	to the following:	
	Margo	Name of Person	<u>\</u>
	Liberty +	Jeel Mouny G	roup ui
	454 YOU	yr St. Suite	Ε
	Ormand	Beach FL City/State and Zip Code	30174
	maggiec	traplowedy on so co	01/1
	E-mail address (	to be used for future annual report notifi	cation)
For further information con	ncerning this matter, please co	all:	
Margaret	Drugton	at ( <u>401</u> ) <u>486 - 2</u> Area Code Daytime	7903
Name of l	Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

#### STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LIBERTY BELL			· · · ·	
( <u>Name of the Limited Liability Company</u> (A Florida Limited Liab	as it now appears on our reco ality Company)	<u>rds.</u> )		
The Articles of Organization for this Limited Liability Company we Florida document number <u>しせのつるればのせる</u>	re filed on <u>リースを</u>	3/2018	_ and as:	signed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabilit	y company here:			
LB MOVING GROVE LI	JC C			
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LI	LC" or the abbre	viation "L	.L.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:	e address on our recor	ds, <u>enter th</u> <u>≥</u> *.		of the n
The state of the s		A:	20 <b>18</b>	
Name of New Registered Agent:		HAS		
		<u> </u>	9	
New Registered Office Address:	Enter Florida street addr	1 1 T	<del></del>	— <del>[1]</del> —
		ress LORIOS Florida OS	PM 12:	
	, l , Cuv	Florida 😇 🙃	Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

### Case 2:21-cv-07092-HG-JMW Document 1-5 Filed 12/23/21 Page 5 of 6 PageID #: 35

. If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person-being added or removed from our records:

MGR = Manager

AMBR = Authorized Member **Type of Action** <u>Address</u> <u>Title</u> <u>Name</u> □ Add ☐ Remove \_\_ Change ☐ Remove \_□ Change ☐ Remove ☐ Change □ Add ☐ Remove —□ (∰ange □ Remove ☐ Change □ Add ☐ Remove ☐ Change

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Effective date, if other than the date of filing:	(optional)
fan effective date is listed, the date must be specific and cannot be prior to date of the Note: If the date inserted in this block does not meet the applicable statut document's effective date on the Department of State's records.	filing or more than 90 days after filing.) Pursuant to 605.0
ne record specifies a delayed effective date, but not an effe The 90th day after the record is filed.	ective time, at 12:01 a.m. on the earlier
Dated 7.5.2018	
Signature of a member or authorized repre	esentative of a member

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Filing Fee: \$25.00